

UNDERSTANDING CONGREGATIONAL ANXIETY

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Introduction

"How can they do that?"

"Are they out of their minds?"

"Can't they see how they are destroying each other?"

"When will they finally realize what they're doing?"

Virtually every congregational leader has had thoughts like these upon encountering congregational conflict. And leaders often find it even more troubling that the parties involved seem unaware of the consequences of their actions.

What may help congregational leaders cope with—and help heal—such conflict is an understanding of the nature of anxiety. Key to this understanding is the recognition that groups tend to demonstrate the same patterns of behavior as individuals during times of high anxiety. These patterns are often so ingrained in a congregation's way of life that they may, to a large extent, be predictable.

Are Individual Responses to Anxiety Predictable?

Typically, individuals deal with their anxiety in whatever way they believe they have dealt successfully with it previously. When anxiety strikes, some people find that denial is effective in minimizing their anxiety. Others may respond to anxiety by becoming aggressive. Anxiety may cause still others to become passive. It can also trigger passive-aggressive tendencies or the use of indirect communication patterns, such as triangling. There are also those who get a "rush" from anxiety; when there is no reason to feel anxious they create one to experience the rush.

Whatever approach one uses to address anxiety, several things are certain. The first is that when an anxious situation is presented, many people prefer to react to the anxious situation than address its cause and explore solutions. For example, the anxiety produced by a financial shortfall may cause people to react by undermining the leadership. If they wished to address the cause of the anxiety, they would respond by developing constructive steps for resolving the shortfall in the short and long term.

Even more certain is that whatever patterns have been used to manage anxiety in the past will, by default, continue to be used over and over again. Because these anxiety management approaches "work" for the individual, they are repeated. To the extent that they are repeated, they may become habitual and, by inference, predictable.

One pastor, in an attempt to enliven a sense of vision in his unhealthy congregation, shared a vision for ministry much like one that was realized in his previous church. His previous church saw the vision as an opportunity and a challenge to direct congregational renewal. The present church, however, became anxious. Within three months, the ruling board demanded the pastor's resignation. The pastor knew that his predecessor was also forced out. After further investigation, he discovered why: the congregation experienced vision as a trigger for anxiety. Their "predictable" way of managing it was to remove the cause of anxiety—in this case the pastor.

Like individuals, congregations demonstrate a certain, almost predictable, "sameness" in their responses to anxiety. These responses, as in individuals, can be recognized as recurring patterns throughout the congregation's life cycle. If, as Freud said, "the child is the father of the man," the recurrent patterns by which a congregation will manage anxiety will be fairly well established during its childhood. For many congregations, this begins to take a definite, recognizable form somewhere around their fourth or fifth year of existence. By their tenth year, these patterns of managing anxiety can be strongly entrenched. Perhaps this helps explain why church planters have recognized that new churches that stop growing or fail to grow after their eighth year have only a miniscule chance of becoming vibrant, growing congregations.

There are also relationships between individual and congregational patterns of dealing with anxiety. In particular, there is often a direct relationship between the way dominant individuals in the congregation manage anxiety and the way the congregation as a whole responds to anxiety.

For example, in one healthy congregation with which I have worked, key leaders are forward-minded, flexible, and supportive of healthy vision. This is due in large part to the personal style of the main patriarch of the congregation. Because he is forward-minded, flexible, and supportive in his private life, his influence has become the dominant mindset of the congregation. As a result, the introduction of change, vision, or anything that would transform the organization is by default considered from the perspective of a forward-minded, flexible mindset. Because of this healthy approach to anxiety, the congregation continues to prosper with an ever-enlarged sense of vision, growth, and vitality in its mission.

In one unhealthy congregation I have observed, reactivity and verbal abusiveness by one or two dominant individuals has become the congregation's "preferred" dominant pattern for dealing with anxiety. During a major congregational conflict, one such member publicly attacked the pastor with anger and abusive language. The pastor was devastated. He couldn't understand what he had done to deserve such treatment—until the next morning when he visited the hospital after learning that the spouse of the abusive individual had had a heart attack the evening before. As the pastor entered the cardiac intensive care unit he was shocked to find the parishioner who had attacked him shouting at her husband's physician, revealing a pattern in her response to anxiety—abusiveness.

Self-Differentiation: A Key to Healthy Leadership

This experience helped the pastor understand that people are fairly consistent in their responses to anxiety. It also helped the pastor to relieve himself of much unwarranted guilt. He was able—perhaps for the first time—to let go of guilt feelings and recognize that the situation had not been his fault. This awareness is a foundation for healthy leadership. Murray Bowen,¹ Edwin Friedman,² Peter Steinke,³ and others refer to this awareness as an important part of "self-differentiated leadership." Leaders who have the capacities for self-differentiated leadership are able to stay calm, especially in anxious times.

Congregational leaders desiring to transform anxious congregational patterns have found that

teaching self-differentiation to the church's leadership teams can be one of the most effective ways to begin transforming unhealthy congregational responses to anxiety. Under the direction of Richard Blackburn, the [Lombard Mennonite Peace Center](#) is one of the most prestigious organizations teaching this approach throughout the world. Its workshops and seminars provide a remarkable foundation for healthier, self-differentiated leadership.

Even as self-differentiated leadership is directed to the management of healthy emotions, Daniel Goleman, Richard Boyatzis, and Annie McKee describe in their book [Primal Leadership: Realizing The Power of Emotional Intelligence](#) how leadership is more about emotion than it is about strategy.

If a leader resonates energy and enthusiasm, an organization thrives; if a leader spreads negativity and dissonance, it flounders. This breakthrough concept charges leaders with driving emotions in the right direction to have a positive impact [in their organization].⁴

One of the most important keys to leadership, then, is the ability to not become emotionally entangled in a congregation's anxious responses. This means leaders must understand the dramatic effect of emotionality and anxiety in organizational systems. This also requires that leaders be able to overcome their own anxious reactivity and stay the course even among the most highly anxious churches. Obviously, this is much easier said than done. The best leaders may find this difficult in the most anxious congregations, even over the short term.

Equilibrium and Predictable Behaviors

To the extent that organizations maintain the status quo, they demonstrate the natural tendency toward equilibrium. Just as physics shows that "an object at rest tends to stay at rest," so organizations will tend to continue to demonstrate predictability. This does not mean, however, that these organizations are necessarily healthy. By the same token, such patterns are not necessarily unhealthy either.

Many healthy churches enjoy the stability of a ministry characterized by cycles of discerning vision, stretching toward attainment of that vision, successfully dealing with opposition and other barriers, and enjoying the fruits of their labors. To a significant degree, such healthy patterns are as predictable as unhealthy ones.

There are, however, limits to that predictability. While leaders can anticipate that they will likely experience the same dynamics in their ministry as those experienced by the pastors who preceded them, each minister's experience will be akin to a different verse of the same song; each new pastor is different from his or her predecessors, and new people and personalities may have entered the congregation.

Can Change Happen?

To paraphrase a common cliché, churches, like people, can change—but not very much. This means most changes will be met with various levels of resistance. The larger the change, the greater the potential for resistance. Congregations seeking to break the so-called "150 barrier" in weekend worship attendance, for example, will almost predictably resist the relational, programmatic, and organizational shifts required to attain and sustain long-term worship attendance of 150 people. Likewise, congregations that had their origins in congregational splits will tend to split again and again...and again.

In one schismatic congregation, not only were the splits predictable, but the timing of when they would reoccur was also predictable. In this congregation, each of four successive pastors spent his or her first three years overcoming the antagonism that existed in the congregation.

In each pastor's fourth and fifth years, the church grew dramatically. At the beginning of the sixth year, the growth came to a screeching halt, and during the seventh year each of the pastors was sabotaged by congregational anxiety. This repeated cycle seemed to center around congregational anxiety triggered by the following issues:

1. **Finances:** The congregation, which had no long-term debt, was wary of taking any risks that might require even small, short-term loans.
2. **Growth:** Many long-time members of the congregation were threatened when they realized that twenty-five percent of the congregation had joined in the last two years. Such growth meant they would lose their influence. Most important, it would threaten their patterns of dealing with anxiety. Indeed, the new families, simply by virtue of managing anxiety differently, would create greater anxiety among the longer-term members.
3. **Trust:** One of the key indicators of congregational anxiety can be the inability to trust others, especially leaders, during anxious times. As leadership was distrusted, accusations of embezzlement, false teaching, and incompetence permeated the organization, though there was no truth to any of the charges.
4. **Poor Anxiety Management:** One of the underlying triggers for the group's anxiety was the inability of the dominant forces to manage their individual anxiety in a healthy manner. When anxiety runs amuck, so do people. It was this out-of-control anxiety—and not the presented (and unsubstantiated) issues of conflict—that really caused members to leave. They left the church because they were afraid of, or were unwilling to deal with, anxiety.

This "seven-year itch" pattern was repeated five times in this congregation's first forty years. At this writing this church is in its third year with its current pastor. Guess what? The congregation is starting to grow! What will happen next? One can **hope** that history will not repeat itself, but it's hard not to be pessimistic given the congregation's history.

These seemingly predictable patterns of behavior can be very challenging for church leaders. Leaders who have been in situations similar to the "seven-year itch" congregation described above will understand the agony of such an experience and the gut-wrenching soul-searching they engender. All of the pastors who served that congregation wondered at one time or another what they had done to deserve such treatment, and the pain of seeing God's people attacking each other, leaving the congregation, or standing by and doing nothing was overwhelming. A sense of being helpless to intervene to prevent further damage only added to their sense of failure and loss.

Much of this pain could have been avoided, however, had they understood the historical patterns of the congregation. Understanding the predictability of such patterns is an important first step toward gaining insight as to how to intervene in anxious congregations.

Understanding Anxiety

Congregational anxiety is a real and growing phenomenon in the church. When asked what he thought of the new seminary applicants, one psychologist who administers psychological tests for a major seminary responded, "They are getting dumber and crazier."

Ministry and leadership are certainly not easy tasks. Conrad Weiser's remarkable book [*Healers Harmed and Harmful*](#)⁶ describes the emotional pain that often accompanies congregational leadership. Every leader, regardless of his or her personality structure and values, is vulnerable. Upon reading this in-depth work, many readers will no doubt find Weiser's

comments closer to reality than they would care to admit. Recognizing these vulnerabilities, however, is the first step toward a healthier self and a healthier leadership style.

Systems Theory vs. Psychology

Leaders must not only understand how individuals respond to anxiety but also how **systems**—composed of a dynamic interrelationship of individuals within a group—respond to anxiety. The literature on this subject is diverse and there appears to be an ongoing tension between systems practitioners (who focus on the system's functioning) and psychologists (who focus on the individual's functioning).

Psychologists say the reasons for behaviors reside in the individual psyche, so they place the responsibility for anxiety on the individual. Heinz Kohut's theory of psychodynamic psychology is dominant in this vein. Abraham Maslow's emphasis on individual "self-actualization" and Erik Erikson's "Hierarchy of Needs" are but some of the many psychological theories that focus on individual cognition and other psychological dimensions of behavior.

Systems practitioners, on the other hand, believe individual behavior is largely determined by the systems in which they live. Some systems theorists downplay—or even deny—the role of individual anxiety, claiming that anxious individual behaviors are solely due to the system's response to anxiety.

The Systems Approach

According to systems theory, if one can change the system, individuals in the system will change their behavior. Murray Bowen has greatly influenced systems theory and its application to family therapy. For him, systems theory provided ways to describe how—and why—families behave as they do. Bowen suggests his family systems theory offers a "way of thinking that may help bridge the compartmentalization of knowledge that presently exists."⁶

Bowen deviated from the mainstream of psychiatric thinking of the 1940s and 1950s in two important ways: First, his theory was developed on the assumption that an understanding of man's emotional functioning must extend beyond psychological constructs to recognize the human's relatedness to all life, and second, his theory assumed that an adequate understanding of human behavior must rest on a foundation that went beyond the study of the individual to include the relationship system. In essence, Bowen proposed that the family operated in ways that were consistent with its being a system and that the system's principles of operation were rooted in nature.⁷

Which theoretical perspective—the psychological or systems view—is correct? There appears to be truth in both. For leaders, an important task is discerning what truths psychology and systems theory apply to dealing with congregational anxiety.

Five Roles in Systems

It is this balance between a systems approach and an individual psychological approach that is necessary to best understand congregational anxiety. This balance recognizes that individuals can and do determine their own behaviors. At the same time, however, individuals will be affected by an ongoing interrelatedness with the system in which they live and function. This interrelatedness between the individual and the system occurs at innumerable levels, both seen and unseen.

An examination of how families maintain equilibrium provides one example of how individual behavior and the influence of systems interrelate. Typical families assign a role to each of their members. The most commonly identified five roles are "scapegoat," "mascot," "hero," "spiritual

leader," and "lost child." Families that can perpetuate each of these roles will be considered "successful" insofar as they are able to maintain their equilibrium.

Whether this equilibrium is healthy or unhealthy is not the family's primary concern. Instead, its **overriding** concern is to perpetuate the status quo by maintaining and perpetuating these roles. For this reason, even unhealthy families will tend to perpetuate their unhealthy, dysfunctional existence, and healthy families will tend to perpetuate their healthy function. As each family member plays out his or her assigned role in the expected manner, each family member contributes to the maintenance and perpetuation of the family equilibrium...for better or worse.

Churches are like families in that they utilize these same roles for the same purpose: **to maintain equilibrium**. This can be seen in healthy churches that are remarkably charitable, forgiving, supportive, and excited about their leaders. It can also be seen in churches that repeatedly force out their pastors.

In churches with a pattern of removing their pastors, the five roles mentioned above are assigned in a way that guarantees the ultimate removal of each new pastor. For instance, the system might assign the pastor the role of "scapegoat" and the role of "hero" to the head antagonist. The "lost child" role might then be assigned to those who might otherwise intervene, rendering them powerless. As the system determines, such individuals will be reduced to simply praying and watching helplessly on the sidelines as the scapegoated pastor is attacked and discarded.

The system may also repeatedly assign the role of spiritual leader to a congregational patriarch or matriarch. Whether leading, participating in, or enabling the dismissal, the spiritual leader will struggle to keep faith alive within the congregation. Sooner or later, this individual may also emerge to encourage healing and promote peace through Bible studies, worship, or other activities. Individuals who assume the mascot role will attempt to provide relief from tension through humor, fun, or spontaneity.

What is important to notice in this example is that each of these roles complements and is interconnected with all the others. The resulting effect is simple. Equilibrium is maintained and the same healthy—or unhealthy—dynamics are perpetuated.

These roles are present in virtually all human relationship systems—including families and churches. Though largely unseen or unnoticed, the degree to which each of these roles is operative—and who fills these roles (or combination of roles) —has an enormous bearing on the family (or congregational) system's nature, identity, behavior, and function.

Internationally known consultant Lyle Schaller confirms that these roles are in the church. In his book, [*The Middle-Sized Church: Problems and Prescriptions*](#), Schaller describes six congregational roles. In [*Looking in the Mirror: Self-Appraisal in the Local Church*](#), he adds that one can expect to find these roles in the church in broadly similar proportions to those found in the general population.

When individuals begin to understand the interaction of roles within family or congregational systems, they start to gain important insights into the wide range of emotional responses that occur in organizations and individuals.

Anxiety in Community

Certainly the church is not the **only** anxious community in our society. Instead, it is one of the

many anxious communities that make up what may be a largely anxious society. Yet every congregational leader must deal with anxiety in individuals and in relationship systems. In *Looking in the Mirror*, Lyle Schaller notes that demographic data suggest that one can expect about three percent of the individuals in any organization to be extremely dysfunctional, a statistic I've learned to use as a coping mechanism. Simply by saying "three per hundred" I remind myself to maintain a healthily differentiated perspective when encountering these anxiety-driven behaviors in the church.

Separation Anxiety

If, as Weiser indicates, unresolved separation anxiety is an undeniable basis of psychological trauma, one can expect that much of the anxiety of the church is centered around separation anxiety. Interestingly enough, both systems practitioners and many psychologists agree with this diagnosis. Rabbi Edwin Friedman is the author of the highly acclaimed application of family systems theory to congregational life, [*Generation to Generation: Family Process in Church and Synagogue*](#). Echoing Bowen's research in family systems theory, Friedman claims that all conflict is the result of imbalanced and unmet expectations of closeness (fusion) and separateness (distance). In other words, conflict is the result of people's anxiety of either being too close and too controlled or too distant and abandoned.

Anxiety in Community: Closeness and Separateness

The struggle between closeness and separateness is played out in the church—and in every relational interaction—on a daily basis. According to Friedman, every interpersonal interaction can be defined, discussed, and analyzed in terms of closeness and distance and how closeness and distance are used to manage relationships. This relational proximity, then, is of pivotal importance for everyone in highly relational communities, including churches, synagogues, and other religious organizations.

The following comments are some expressions of the dynamics of separation (closeness and distance) by parishioners toward their pastors.

- The pastor is too controlling (or not controlling enough).
- Why won't the pastor visit me? (or visit me more often?)
- The pastor doesn't like me. That's why the pastor is always so critical!
- After all I've done I don't deserve to have the pastor treat me that way!
- How dare the pastor ignore me, challenge me, or doubt me!
- If I don't do what the pastor asks of me, maybe she won't like me anymore.

Note that the separation issue is not played out only by the parishioner in relationship to the pastor, but also by the pastor in relationship to the parishioner. Pastors, then, must be aware of their own separation issues. Depending on how deeply entrenched—and evident—the pastor's separation issues are, all of the above issues can be seen in pastors, too.

The following comments are examples of some expressions of the dynamics of separation by pastors toward parishioners.

- Why are the leaders so controlling?
- Why doesn't anybody respect me or listen to me?
- Don't the people care for me?
- I don't deserve to be treated this way. Maybe if I change they'll love me.
- How can members ignore me?
- I hope I do everything right so that people don't get mad at me and leave the church!

Naturally, there are times when some of these responses might be healthy. The important point to remember is that it is in the responses of individuals that one can see anxiety at work. When dealing with anxiety, an important rule of thumb is this: the more reactive the response, the greater the anxiety at work. When anxiety is present, all relationship interaction between individuals in the system becomes distorted. This distortion can result in unhealthy, anxiety-dominated relationships. As anxiety increases, unhealthy behaviors, ranging from compulsivity to narcissism and despondent passivity, may also appear.

Anxiety in Community: Anxiety and Relationships

Sharon Wegscheider Cruse, Janet Woititz, Judith Viorst, Melody Beattie, Steven Carter, Julia Sokol, John and Linda Friel, and Henry Cloud are best known for their insights on anxiety and relationships. Their insights on codependency, boundaries, shame, control, and adult children of alcoholics greatly help us understand the roots of anxiety and its effect on relationships.

Melody Beattie's book [*Talk, Trust, and Feel*](#)^b describes how individuals troubled by separation anxieties go through various cycles, behaviors, and thought processes indicative of these anxieties. This results in unhealthy relationships. Such relationships may be abusive, codependent, addictive, or unhealthy in other ways. The people in these unhealthy relationships are afraid either to be alone or to be too close to others, and they thus are not able to enjoy healthy relational intimacy with others.

Healthy relational intimacy is based on the ability to learn how to develop trust in the unhindered verbalizing and sharing of feelings in relationships. As Beattie noted, when individuals are not able to "talk, trust, and feel" with others, anxiety increases. In response, defense mechanisms arise. If the anxiety is not released by talking, trusting, and feeling, anxious individuals will develop patterns of acting out their anxiety in behaviors. The maxim, "What is not talked out is acted out" describes this phenomenon.

Acting out often disrupts, upsets, and destroys relationships in families and churches. If uninterrupted, individuals may also begin acting out in defiance in their relationship with God. This "acting out" is one major cause for unusual and seemingly inexplicable behaviors ranging from uncontrolled rage to verbal and physical abuse. Unfortunately, this acting out may also be evidenced in misconduct by pastors, leaders, and parishioners who choose not to engage in healthy talking, trusting, and feeling with their spouses and, instead, engage in inappropriate relationships.

Giving a "Voice" to Relieve Anxiety

In their best-selling book [*Getting to Yes: Negotiating Agreement Without Giving In*](#), Roger Fisher and William Ury apply the principles of the Harvard Negotiation Project to relationships and organizations. One of Fisher and Ury's most important urgings to leaders is to give people a "voice" to express their feelings as a means of reducing anxiety. In relational terms, giving people a voice is really inviting them to healthy relationships in which they can talk, trust, and feel.

Unfortunately, not everyone has the capacity to express his or her "voice," much less use it appropriately. In some cases, giving voice to individuals enmeshed in addictive emotional processes may make as much sense as allowing an abusive, intoxicated person a public forum by which to attack others with impunity. The more he or she talks, the more absurd the situation may become. This increasing absurdity will almost certainly result in greater anxiety for all present.

Anxiety in Community: The Addictive Connection

Facing separation anxiety is one of most painful experiences of grief and brokenness. Consequently, many people avoid experiencing the feelings associated with their separation fears. In order to cover the "black hole" of emptiness caused by abandonment and separation, individuals turn to a virtually unlimited number of addictive substances and compulsive behaviors.

Several years ago, while immersed in numerous readings about alcoholics and the effects of addiction on their families, I consulted with a 150-year-old congregation nestled in a beautiful resort community on the Great Lakes. The pastor called me and asked for a consultation. He explained how the congregation was beset with uncontrollable anxiety and conflict. Overwhelmed by the congregational anxieties, he had submitted his resignation as pastor, effective in 90 days. As consultant, my role was to calm things down and enable him to have a "healthy" exit.

The consultation began with a MinistryHealth.net seminar entitled "Understanding Anxiety: Emotional Process in the Congregation." As we discussed anxiety, I shared how much of what happens in highly anxious congregations is very similar to what happens in alcoholic families.

A "Eureka" Moment: We're Addicted!

In one of the most memorable "eureka" moments of my consultation ministry, six congregation leaders (of 25 in attendance) came up during the break and asked, "Tom, do you do alcoholic counseling? My spouse is an alcoholic." These individuals came forward because they began to recognize that the anxiety their congregation was experiencing had dynamics nearly identical to those of their alcoholic families. Apparently, these anxious leaders brought their family anxieties to bear in the congregation's relationship system. As they did, their anxious patterns of behavior permeated the church at virtually every level of its functioning.

After the seminar, the congregational chairperson described how she had been married to an alcoholic and was currently married to a husband who was rabidly anti-alcohol in any form whatsoever. "What happened? I don't understand it," she said. I responded, "When you changed spouses, you didn't escape addictions. You simply **changed** addictions. As your first husband was addicted to alcohol; your current husband is addicted to being anti-alcohol. Each extreme will bear the same addictive dynamics."

At the end of our discussion she, like others who came forward, realized they had brought an anxiety-based pattern of behavior into the church. As these dynamics were identified and discussed, the leaders began to develop a consensus on how to change themselves...and the church.⁹

The next finding that emerged from our interaction was that the highly anxious dynamics of distance and closeness played out in this church. Locked into relationship patterns common to alcoholics and other addiction-prone individuals, the leaders of this church were unable to talk, trust, and feel. Thus, they acted out their anxieties in ways that resulted in serial pastoral force-outs, a continued inability to develop healthy ministry vision, and the development of leaders who were not able to maintain a healthy sense of boundaries and self-differentiation.

Having infiltrated the highest levels of this church, the patterns of anxious, addiction-driven behavior became, in themselves, addictive. One might even say that the membership became intoxicated by the emotional dynamics of the anxiety. Sadly, they nearly brought this 150-year-old community of faith to an end.

Fortunately, through subsequent consultations, this congregation was able to begin to unravel its anxiety, retain its pastor, and begin creating a healthy "talk, trust, and feel" congregation.

A key to renewal for this church was that its members were able to withstand the anxiety necessary to change from an unhealthy, anxious-based system to a healthier level of functioning.

The greatest joy for those in this congregation was that once they began the path of recovery, they realized that the pain they experienced was really a gift of God. The unhealthy addictive dynamics they so painfully experienced led them to a sense of spiritual brokenness, and it was this brokenness that led them to develop healthy, healing connections with the community. They invited an Alcoholics Anonymous group to meet in the church, they started support groups for grief and depression, and they made dramatic inroads in providing for the homeless in the region.

Three years later this congregation appears to be healthily focused on its mission, is supportive of its pastor (who retracted his resignation), and is making significant progress in helping individuals in the community deal with anxiety in healthier ways.

Churches that "act out" are not uncommon. Those who are willing to painfully work through the process of introspection and growth, however, are not nearly so common. But when such growth occurs, congregations can begin to sow the seeds of long-term renewal and anxiety reduction.

Anxiety in Community: Is the Church *Really* Addicted?

It would be easy to overstate the presence of addictive dynamics on many levels in organizations and churches. Yet addictive dynamics are quite entrenched in civilized Western society. Abraham Twerski and Craig Nakken's book [*Addictive Thinking and the Addictive Personality: Understanding the Addictive Process, Compulsive Behavior, and Self-Deception*](#)¹⁰ is perhaps the one book that affirms the prevalence of addictive behavior patterns in organizations. The relational dynamics of addiction Twerski and Nakken describe in organizations are virtually identical to those found in John and Linda Friel's [*Adult Children: The Secrets of Dysfunctional Families*](#), Robert J. Ackerman's [*Perfect Daughters: Adult Daughters of Alcoholics*](#), and several books on codependency.

Melody Beattie's [*Codependent No More: How to Stop Controlling Others and Start Caring for Yourself*](#) provides further agreement and insight on addictive behaviors. My article, "[Ten Commandments of Dysfunctional Families](#)," at MinistryHealth.net, further describes these dynamics, which are seen in pastors and parishioners alike.

It's undeniable: unhealthy, anxious congregations behave like addictive individuals and families. Interestingly enough, it is specifically anxious, addictive dynamics that Rabbi Edwin Friedman attributed as a factor contributing to the "failure of nerve" in contemporary Western society.

Needed: Ecclesiastical Sobriety?

One unexpected but remarkable resource for understanding and intervening with addictive behaviors—and the unhealthy, addiction-driven, anxiety-ridden individuals who are in them—is Toby Rice Drew's four-volume series, [*Getting Them Sober*](#). Recommended by the likes of "Dear Abby" and Melody Beattie, each volume contains approximately 40 to 50 one- or two-page chapters. These short gems, which were originally written for family members of alcoholics to assist them in responding in healthy ways to their addictive relatives, provide many insights into antagonistic and controlling behaviors. Helpful and easy to read, these resources are remarkably appropriate for congregational leaders in addictive-prone organizations.

Developing an understanding of the dynamics of addictive emotional processes is an important

way to maintain a healthy self and healthy leadership. Toby Rice Drew underscores the importance of intervention in addictive relationship systems in volume 3 in his *Getting Them Sober* series. As he says in that volume, "If you live with insanity long enough you will (a) feel insane, and (b) act insane."¹¹

Anxious churches may be addicted. Those that are have a choice: to heal or not to heal. If you are the leader, you have a choice. You can either go insane or apply strategies to establish a sense of sanity.

Addiction and Anxiety

One of the interesting aspects of the relationship between addiction and anxiety is that anxiety can contribute to addiction. Addiction can mask pain for a while, but sooner or later, as Nakken notes, addiction starts to create pain, the very thing the person is trying to avoid. In creating pain, the process also creates a need for the continuation of the addictive relationship. The addict seeks refuge from the pain of addiction by moving further into the addictive process.¹²

This dynamic is seen in highly anxious congregations that have unhealthy reactive patterns of conflict. After discovering that fusing with those who are willing to take control of their anxiety eases their own anxiety, clusters of these anxious individuals join together in unhealthy anxiety-based relationship groups. As anxious individuals participate in these groups, they feel that their anxieties are lessened. But they are not. They are merely masked under a heightened level of addiction-based and anxious "Band-Aid"[™] relationships.

Those to whom anxious individuals give their control are also anxious. Instead of directing their energies inward to develop healthy ways to deal with their own anxiety, these anxious individuals often direct their energies outward by manipulating and controlling others and their environment.

What is the result? **Both** groups get what they want—namely, a mechanism by which they can have their anxiety controlled, even if by unhealthy means. Frequently, anxious individuals use fusing with others as a defense mechanism against their fear. In other words, they avoid the fear of things going out of control by fusing with those who are more than willing to take control and responsibility for them. This is one of the roots of codependency. By allowing others to fuse with them, those in control also gain a powerful defense mechanism. By exerting power, they keep individuals distanced from them. The greater their need for control, the more they will seek emotional isolation from others.

This dynamic describes **numerous** congregational dynamics. It describes, for instance, how—and why—so-called antagonists often express such extreme needs for power and control. Those needs are rooted in their fear. It also describes why trying to shift the unhealthy equilibrium away from a historically entrenched antagonist is such a precarious proposition. When one threatens, withholds, or destroys a person's unhealthy defense mechanisms, that individual will likely react in very intense, visible ways.

When an antagonist steeped in anxious, addictive behaviors is confronted, a multitude of other events may also be triggered. One thing that is likely to happen is that anxiety will be triggered in both the antagonist **and** those who are fused to the antagonist. That's why confronting an antagonist seldom is a one-on-one venture. When an antagonist is disturbed, all those who depend on that person to ease their anxieties are also disturbed, and the hornets' nest that results can be overwhelming.

In some cases, this anxiety-based fusion may also describe how some pastors are able to draw crowds and grow congregations. This fusion may be expressed as a type of charisma, preacher

worship, blind allegiance, or out-and-out brainwashing and mind control. For this reason, family systems theory may suggest the reality that church growth and health are not faith issues per se. Instead, they are issues of interpersonal bonding between two parties. If they ease each other's anxieties by filling their needs for anxiety management, a bond is formed, charisma is born...and emotional loyalty ensues.

Addiction and Anxiety: Healthy Churches, Healthy Faith

Insofar as churches and their leaders are effective in applying healthy principles of faith to their lives and interrelationships as God's people, the church will be more effective in realizing God's mission.

Perhaps the most important principle for anxiety management is a proper understanding of the grace of God. "For it is by grace you have been saved, through faith—and this not from yourselves, it is the gift of God—not by works, so that no one can boast" (Ephesians 2:8-9 NIV). Grace, in the Christian tradition, is how we are saved. But one of the key hallmarks of grace is also the promise that God will never, ever abandon the faithful. His promise of grace is simply the promise of unconditional non-abandonment. When individuals know and trust that God will always be there, their anxiety of abandonment begins to subside.

When congregational leaders recognize that the fear of abandonment is at the root of anxiety, they recognize that the preaching of grace is the greatest single way to relieve anxiety. God's promise is that he will be with us always to the end of the world (Matthew 28:18-19). To the extent that individuals trust this, they will find their anxiety is relieved. To the degree to which the church is able to effectively proclaim and help individuals internalize grace in all its doings and help individuals affirm that God is surely with them—always, everywhere, every day—anxiety will be reduced and church health will increase.

Addiction and Anxiety: Like (Addictive) Family, Like (Addictive) Church?

By more than coincidence, the fusion and enmeshment that happen in anxious congregational systems between anxious individuals mimic what happens in addictive family units.

For example, an abusive, alcoholic husband may be in abusive control of his family. In spite of all the pain, fear, hurt, and abuse, the wife stays with the husband. The children are told to keep quiet. Fearing the father's wrath, they stay in the family. They refuse to rebel. They do not follow common sense and do what is right to deal with this addictive, abusive father. Why? Because they believe that even though it is frightening to be in the family, it is even more frightening to **go out alone** from the family. This is the power of separation anxiety.

When people believe their survival is at stake, they will do anything—as irrational as it appears—to survive. Unfortunately, much "survival" behavior in anxious systems can encourage self-sabotage. Janet Geringer Woititz describes how this self-sabotage takes hold in such individuals in her book [*The Self-Sabotage Syndrome*](#). Those leaders affected by self-sabotage can experience a wide variety of manifestations of pain ranging from workaholism, indecision, entrapping perfectionism, burnout, poor management of employees, and, among other things, inept or inadequate responses to crises.

In churches where an anxious "survival" dynamic is dominant, turning it around is extremely difficult and often hazardous. Adding to the difficulty is trying to avoid triggering any tendencies toward self-sabotage that may exist. Some anxious congregations may heal and experience increased health and renewed vitality. However, most congregational systems will almost always tend to feel threatened by any intervention.

When high levels of anxiety are triggered, so are the unhealthy organizational system's mechanisms designed to return it to its original unhealthy, anxious equilibrium.

Addiction and Anxiety: Vision-Proof Churches

For this reason highly anxious churches may be considered "vision-proof." Like individuals caught in what Nakken calls "the negative reinforcement of an addictive personality,"¹³ vision-proof churches often get caught up in repetitious patterns characteristic of alcoholics or other addicts:

- I don't really need people.
- I don't have to face anything I don't want to.
- I'm afraid to face life and my problems.
- Objects and events are more important than people.
- I can do anything I want, whenever I want, no matter whom it hurts.

Some "maintenance" churches are anything **but** healthy. Some are outright addicted—in a big way! Their attitudes reflect those demonstrated by alcoholics. Note the similarities!

- We don't need people!
- If we don't need people, we certainly don't need **more** people!
- So what if we've got problems? We don't have to face anything we don't want to.
- We don't care who gets hurt as long as we get our way and keep on getting what we want and doing what we've always done.
- We can do anything we want to and no one—not even God—is going to stop us.

Could "We've never done it that way before" be indicative of anxious congregations dominated by addictive emotional processes? Note that what is common to all these anxious responses is an inability to manage anxiety. A key capacity for anxiety management, as mentioned above, is the ability to talk, trust, and feel.

Whenever there is a breakdown of communication and the honest and forthright sharing of feelings and support, anxiety increases. The increased anxiety results in an emergent pattern of distrust. Without healthy trust, the decline of the church inevitably follows. Congregational health, like individual health, is rooted in healthy capacities to talk, trust, and feel. This must occur within oneself, in one's relationship system, and, especially, with one's God.

Addiction and Anxiety: Ministry to Addictive Churches

Perhaps some of the most difficult experiences of pastoral ministry occur in churches dominated by addictive emotional processes. Totally unaware of the situation, passionate, gifted, and well-intended men and women of God (clergy and lay) go into such churches to "save" them. They naively believe that by simply providing quality ministry, leadership, and their own remarkable skills, the churches will move from anxiety to health. Certainly the people will understand simple logic, they think. Certainly they'll understand God's Word, right?

No, they won't understand it, perhaps not at all!

The prophetic tradition in the Christian scriptures records numerous times when great spiritual leaders were sabotaged or ineffective at ministering to the people of God. "Repent!" was often their message. A violent, reactive, and vehement "No, thanks!" was often the response. Whether one considers Moses, Abraham, Paul, or Jesus, the words of Isaiah apply: "Ever seeing but not perceiving, Ever hearing but never comprehending" (Isaiah 69 NIV).

Dealing with Congregational Addiction Today

Like prophets, pastors and other church leaders should expect that they, too, may have difficulty being heard by anxious crowds. After all, the ministry bears the mantle of the early prophetic tradition in our day. Unfortunately, the pattern that often plays out goes something like this:

1. A naïve but energetic and remarkably competent individual becomes the pastor of an addictive church.
2. The pastor believes that if everything is done perfectly, people will respond positively and love/respect/accept the pastor's ministry.
3. When the congregation doesn't respond as expected, the pastor simply tries harder and harder to please others through ministry accomplishments. As the pastor exerts greater efforts, he or she becomes unintentionally absorbed and involved in the addictive emotional process.
4. The congregation rejects the pastor and anything he or she has done to bring growth.
5. The pastor, broken and devastated, goes into a deep depressive cycle with a loss of self-respect, self-confidence, self-control, self-importance, and self-love. Without intervention, the pastor may leave the ministry by active choice or by "acting out anxiety" via professional misconduct.
6. The unhealthy addictive congregation gets another pastor.
7. See step #1.

Addiction and Anxiety: Pastoral Acting Out

Addictive emotional processes affect everyone within their influence. Congregations are not the only ones susceptible to addictive emotional processes. Pastors are also vulnerable. This vulnerability may lead to pastoral misconduct, including sexual misconduct.

Patrick Carnes is one of the most respected pioneers in the area of sexual misconduct. In [*Contrary to Love: Helping the Sexual Addict*](#), Carnes provides remarkable insights regarding the progression of addiction in general and sexual addiction in particular. His books make the anxiety-addiction connection undeniable. Perhaps one of Carnes' most important premises, echoed by the writings of many others, is that addictions seldom appear as a single addiction. Instead, they nearly always come in multiples. For congregations, this means that consultants, pastors, leaders, and members will have to find ways to untangle the web of intertwined, overlapping, and confused—but interrelated—foci of the addictive process. The key for untangling the web is to address the root cause: uncontrolled and improperly managed anxiety.

For pastors, this means that when misconduct occurs, it is not just one issue—the sexual misconduct—that must be dealt with. Instead, the misconduct may involve acting out an entire complex of multiple addictions, unhealthy coping mechanisms, and out-of-control childhood issues within the context of an anxious congregational setting. The higher the levels of organizational anxiety—covert or overt, acute or chronic—the higher the likelihood that pastoral anxiety will increase. Tragically, with increased anxiety one can expect a corresponding increase in misconduct.

Pastors entangled in the whirlwind of congregational anxiety often find themselves overwhelmed with myriad unidentifiable sources of anxiety. Ironically, the harder those who don't understand the anxieties try to identify and work through them, the more anxious they become. As anxiety triggers a sense of being out of control, anxious pastors begin acting out their anxiety in a variety of unhealthy out-of-control ways. This may include everything from sexual misconduct, leaving the ministry, becoming overly rigid or overly flexible, expecting perfection from those around them, or becoming apathetic.

Whatever the nature of the acting out, pastors, their families, and churches experience great pain. As in the case of Humpty-Dumpty, picking up the pieces after the great fall is often extremely difficult and painful. Sometimes it can seem impossible. Successful recovery requires several years and removal from unhealthy environments.

When acting out occurs, the answer is not merely to discipline the individual. Simply being judgmental and removing the pastor is not really helping the hurt, nor is it directing the pastor to healing. Often, simplistic solutions such as "just get rid of the pastor" or "you're gone" are not only naive; they may also be rooted in the anxiety of those who throw the first stone. Too afraid to risk dealing with the offender, too anxious to face the possibility of extending forgiveness and trust, and lacking the capacity to talk, trust, and feel, these individuals may simply cast hurting pastors aside, often toward greater pain and hurt.

Without compromising God's will in these matters, healthy intervention is necessary for both the pastor and the congregational system in which ministry was conducted. Both parties are affected. Both must deal with the intense multiplicity of anxious interactions that propelled the acting-out behavior. If possible, intervention should guide the individual—and congregation—through intense brokenness, forgiveness, renewal, and restoration to an appropriate place within the Kingdom of God and the experience of grace.

Addiction and Anxiety: Function and Types of Addiction

- **Function of Addictive Patterns**

Another interesting similarity that addictive organizations and individuals share is that the addiction can take on several different patterns. Peter Steinglass, general editor of *The Alcoholic Family*, notes that there are several types of addictive patterns. These patterns serve various functions. The first and most important is self-preservation. Whether real or imagined, perceived danger or threat to one's fragile, anxious world will trigger addictive reactions.

A second and related function of addictive response patterns is to manage internal anxiety levels. Highly irrational and reactive behaviors can be demonstrations of the release of addictive anxiety. Often this anxiety is targeted—usually unfairly—at specific persons.

Highly intense reactivity, abruptly ended communication, and other otherwise inexplicable relationship breakdowns can often be attributed to reactive responses characteristic of addictive types of anxiety. A very tragic consequence of these reactive episodes is self-sabotage. Individuals with addictive anxiety not only hurt those around them, but they also hurt—or destroy—themselves. Their highly anxious state prevents them from being able to regulate their negative behavior, frequently with negative results.

A third function of addictive responses is to maintain a façade of calmness; projecting a false sense of security gives the appearance of being in control. As soon as this façade is threatened, addictive individuals fear that others will discover their painful secret—that they really are fragile, vulnerable, fearful, and very anxious. Their addictive response enables them to maintain the façade without having to face their truth. Their addictive response also keeps them from learning how to have healthy relationships. This task consists of being able to learn three key elements of healthy relationships: the capacity to talk and share oneself; the capability to trust in oneself and others; and the ability to learn, share, and accept one's true feelings.

- **Types of Addictive Patterns**

Like alcoholics, some anxious churches demonstrate their anxiety in "binges." This happens when suddenly, out of the calm, the church becomes consumed by anxiety. These binges, or

anxiety eruptions, often occur at regular intervals. In these churches, it seems that there is a natural inclination to demonstrate addiction-based behaviors (like jettisoning a pastor) on an almost predictable timetable. This was the case with the church described earlier, which was on a seven-year cycle; every seven years the congregation would experience an anxious "binge" resulting in the ouster of its pastor.

Other churches, like chronic alcoholics, cannot go through a single day without being anxious. They need to maintain an unhealthy addictive equilibrium by satisfying their urges every day. No matter what day you arrive, they're sick—and often not willing to recover. In these churches, manifestations of chronic anxiety can be observed, the most obvious being intense emotional closeness or intense emotional distance.

Those responding with intense emotional closeness often demonstrate a type of gang-like enmeshment. In this scenario, both the extremely strong leader and the enmeshed followers are driven by anxiety typical of addictive individuals. When anxiety erupts, the response is usually instant warfare. Large groups of individuals are almost instantly energized with more than necessary force to remove the source of the threat. Many conflicts, especially more extreme ones, are of this nature.¹⁴

Those whose anxious response is characterized by emotional distance tend to avoid interaction with the source(s) of anxiety at all costs. On the surface they may appear friendly, but this friendliness often masks an inability to appropriately confront wrong, hold others accountable, and otherwise engage in healthy relationships. These congregations offer unhealthy excesses of "trust." This false trust results either in (1) minimal or virtually nonexistent procedures, guidelines, and policies for appropriate organizational accountability, or (2) excessive development and enforcement of policies and guidelines. Either extreme mitigates against healthy flexibility, reinforces unhealthy control, and provides a framework to ensure that certain predictable patterns will continue to reoccur *ad nauseum*.

These churches are doomed to remain vision-less, ineffective, and passive. Their only hope is that they, like the enmeshed group above, learn healthy relationship skills. In addition to learning how to talk, trust, and feel, they need to learn anxiety management, boundaries, and how to maintain a healthy sense of self (so-called "self-differentiation") in groups.

Addiction and Anxiety: Pastoral Intervention in Anxious Organizations

Pastoring an anxious church steeped in addictive emotional processes can be like leading a recovery support group. In fact, anxious churches may have a number of the same characteristics as people in addiction recovery groups, including:¹⁵

1. High leader expectations
2. Participant passivity
3. Resistance to extending beyond themselves
4. Shallow sacrifice
5. Entitlement mentality
6. "Poor me" focus
7. Projection of guilt
8. Inappropriate anger directed at leader
9. Unmanaged high anxiety and frustrations at inability to control it
10. Inability to recognize options
11. Egocentric focus on their own needs
12. Unwillingness to change
13. Overall ineffectiveness of empathy
14. Selfish focus on their own needs at others' expense
15. Grouping together based on similar pain to justify and perpetuate their pain

16. Tendency to become inconsistent in their faith walk
17. Lack of healthy boundaries
18. Pain-driven behavior
19. Immediate gratification orientation
20. Low self-esteem
21. Controlling behaviors
22. Undermining of leadership
23. Defensive behaviors

These are just some of the many forms of anxious congregational behaviors. As leaders learn to understand that congregations function and respond as systems, they begin to see the complex interaction of groups and their respective ways of managing anxieties. As leaders recognize, understand, and respect these dynamics, they begin to see that church leadership is not just a matter of leading or motivating individuals. It's also a matter of shaping, influencing, and leading systems away from crippling anxiety to greater health and vigor and more effective realization of the congregation's mission.

Speed Leas and George Parsons's [*Understanding Your Congregation as a System: The Manual*](#) and the accompanying [*Congregational Systems Inventory*](#) provide an excellent way to learn about and introduce the concepts of systems theory in a congregation.

Addiction and Anxiety: A Spiritual Perspective

Unhealthy intimacy patterns in which people act out—and do not talk out—are also of spiritual concern. Those who cannot "talk, trust, and feel" God cannot love God with "all their heart, mind, and soul." Healthy spirituality requires capacities for healthy intimacy with God in one's entire being. As Paul wrote in Ephesians 5:

In this same way, husbands ought to love their wives as their own bodies. He who loves his wife loves himself. After all, no one ever hated his own body, but he feeds and cares for it, just as Christ does the church—for we are members of his body (Ephesians 5:28-29 NIV).

As this text demonstrates, in order to love one's spouse one must learn to love oneself. This love requires a capacity for healthy "talk, trust, and feel" intimacy.

The prime directive of spiritual organizations such as churches—and specifically the Christian church—is to teach love. "God is love," "God so loved the world," and other scriptures speak of God's nature. In so doing they call individuals to love God. When people are called into discipleship, the scriptures often require that they separate from their material and relational connections in the world:

- Once the hand is put to the plow one cannot look back.
- Once you start fleeing you can't turn around or you'll become a pillar of salt.
- If you're going to be a disciple you can't bury your father.
- If you're rich, you can't follow Jesus if you're still tied to possessions.
- If you want to be like Elijah, butcher your oxen, burn the yoke, and move on.
- If you're a fisherman you must leave your nets and boats behind.
- If you follow Jesus your family will be divided mother against daughter.
- If you want to live in God's promises you'll have to move out of Haran...even if you're 75 years old. And when, 25 years later, God finally gives you a son he'll test your discipleship by seeing if you're able to separate yourself from your son by offering him as a sacrifice.

This is how God tests love: by causing us to have to undergo separation from earthly loves. As Job discovered, he gives so that when he takes away we will love him and exclaim, "The Lord gave, and the Lord has taken away; blessed be the name of the Lord" (Job 1:21). If separation anxiety is a root cause for unhealthy individuals and organizations, then the number one task is to provide a spirituality that recognizes, accepts, assists, and celebrates the process of separation, brokenness, and spiritual renewal.

Perhaps it is not coincidental that many in this so-called "postmodern" age are seeking this sort of authentic and genuine spirituality apart from the institutional church. In unhealthy, anxiety-based, addictive congregations, such authentic spirituality cannot exist. The addictive process overwhelms it.

Addiction and Anxiety: Grace and Trust Overcome All

The first key for confronting and transforming anxious and addictive emotional processes is grace. Grace, as understood in the Christian tradition, is defined by Paul in Ephesians 2:8-9: "By grace you have been saved through faith, and this is not your own doing; it is a gift of God—not the result of works, so that no one may boast."

This traditional understanding sometimes obscures an important aspect of grace, which is God's unconditional promise not to abandon us. Grace is God's guarantee that no matter what happens, he's always there. No matter how great or painful the loss, God will never leave. Others also share this same view of God. Indeed, it is characteristic of most spiritual systems.

The second key is trust. To trust God does not only mean to have faith in God. Rather, we can think of trust in this way: trusting God means allowing and seeking God's way—regardless of the pain, the inconvenience, the cost, the sacrifice—even if it means death.

Highly anxious churches plagued with separation anxieties do not evidence the elements of healthy churches: vision, relational warmth, the ability to sacrifice, and the capacity to experience joy. Why? Because they are held hostage to their fear of being separated from the things and people they depend on in the material world. And what kind of emotions do hostages show? Those who have given up and become cynical, depressed, despondent, unresponsive, blaming, introspective, bitter, and cold. Congregations held hostage by their fears demonstrate these and other symptoms of anxiety.

A Faith Issue?

Put in this perspective, congregations overcome with addictive emotional patterns have a serious **spiritual** problem. Like the church of Ephesus, they have not only lost their first love, they are dangerously close to losing faith altogether! Why? Because they are not willing to leave what is comfortable to follow God's call to them. They fear separation because they really aren't sure if God's grace-based promise not to abandon them is really true. If they cannot be sure, then they cannot trust God's leading.

Pushing the Envelope of Grace and Trust

In this context, perhaps one of the most important tasks for those who would seek to transform anxious organizations is to continually keep the people of God on the cutting edge of grace and trust. There are numerous ways to do this: sermons, liturgical rites, assimilation programs, and stewardship campaigns are all necessary. Tithing is also an important strategy for challenging members to trust. "Test me in this," God told Israel through Malachi. "See if I will not bless you."

Big Hairy Audacious Goals

Like Martin Luther King, Jr., who was compelled to proclaim, "I have a dream," all God's servants have compelling reasons to have "God-possible dreams." Such dreams are those visions that can only be accomplished by God. Secular writers call these seemingly impossible dreams BHAGs.¹⁶

BHAG is an acronym for "big, hairy, audacious goal" (although some church folks call them big, holy, audacious goals). "No BHAG, No Growth," I wrote in my article "Get A BHAG" in MinistryHealth.net.¹⁷ One might also say, "No BHAG, No Faith." Scripture is a voluminous collection of BHAGs—creation, miracles, resurrection, grace; who would have ever believed it was possible? It's just one BHAG after another. Apparently God must love BHAGs; he's done so many of them.

Examples of BHAG

How can you stretch a congregation's faith? How can the leadership get people into a lifestyle of grace and trust? What is one of the greatest tools for teaching congregations how to manage anxiety? Get a BHAG! Here are some examples BHAGs for congregations:

- Experiencing the spiritual renewal of a congregation that had been mired in anxiety, conflict, antagonism, and self-centered ministry.
- Moving the church to a new location.
- Totally shutting down a declining church, restructuring its worship and ministry, changing its name, and restarting it in the confidence of God's blessing.
- Setting a faith budget well beyond the reasonable expectation of anyone and achieving it.
- In faith, adding staff to promote and extend the ministry of Jesus Christ from your church.
- Adopting extraordinary mission goals that your church has never even imagined it could meet.
- Planting a new church with the assistance and sponsorship of your congregation or a cluster of congregations.
- Personally surviving a congregational split. Overcoming temptations to commit suicide, surrender to mental illness, or resign is no mean accomplishment. It's nothing short of miraculous. Indeed, if God were not there for us in the conflict, who could stand?
- Following the BHAG when God calls and beckons you and the congregation to stretch toward his vision.

As long as there's a possibility for a BHAG, the church has possibility for growth. If BHAGs continue to be rejected there is a strong possibility that unhealthy, anxious emotional processes will begin—or have already begun—taking control of the organization.

Conclusion: Addressing Anxiety

The more one sees how anxious responses imitate behaviors found in addictions, the greater the likelihood one can understand the often incomprehensible anxious responses seen in congregations. When leaders see that the real issue in the church is the anxiety that underlies the surface responses, they can begin to develop a more effective presence in the congregation.

Daniel Goleman, Richard Boyatzis, and Annie McKee's book *Primal Leadership: Realizing the Power of Emotional Intelligence*, mentioned earlier, offers remarkable insight for leadership. Applying insights offered by theories of emotional intelligence, Goleman et al. provide scientific support for the idea that organizations that encourage leadership styles that enable such

things as flexibility, tolerance for ambiguity, risk-taking, and innovation are organizations that develop healthy anxiety management.

As leaders model a less anxious style of leadership, they will discover that the principle of biblical grace is the key theological tool for addressing congregational anxiety. As grace is proclaimed, God uses it to bring individuals—and eventually the whole congregational system—to recovery. As congregations are led to understand grace, God calls the entire congregational system to greater anxiety management.

Perhaps the ultimate test of the system's ability to manage anxiety is to take a BHAG step of faith. Can you lead your congregation to that goal for the glory of God? Understanding the role of your own—and your congregation's—anxiety is an important first step. Don't be afraid to take it . . . today!

Reflection Questions

1. Fischer observes that "when an anxious situation is presented, many people prefer to react to the anxious situation than to address its cause and explore solutions."

Do you agree? What are some examples of reacting that you've encountered in your congregation? Were people able to move beyond reacting and seek solutions? If so, what made the difference?

2. Fischer states that an important key to leadership "is the ability to not become emotionally entangled by a congregation's anxious responses."

As a congregational leader, have there been times when you were able to not become entangled? What did you do in those instances? What resources did you draw upon for strength during anxious times?

3. Fischer's discussion of anxiety and addiction points out that—like addicts who seek relief from the pain of their addiction by becoming more addicted—highly anxious individuals in congregations often "join together in unhealthy anxiety-based relationships" as a defense against their fear. Then, if one person in the anxious group is confronted, the entire group reacts.

Have you experienced such "anxiety-based" groups in your congregation? If so, what was that like? How have you responded?

4. Fischer believes that an important principle for anxiety management is understanding God's grace. When individuals know and trust that God will always be there, then their fear of abandonment will start to subside. He says that "to the degree to which the church is able to effectively proclaim and internalize grace in all its doings and help affirm that God is surely with them—always, every where, every day—anxiety will be reduced and church health will increase."

What are your thoughts about the capacity of God's grace to cast out anxiety? While grace is a gift, how might your congregation become more open to the experience and expression of grace? What practices support the recognition and appreciation of God's presence and grace among us?

Notes

1. Murray Bowen and Michael Kerr, *Family Evaluation* (New York: Norton Publications, 1988).
2. Edwin Friedman, *Generation to Generation: Family Process in Church and Synagogue* (New York: Guilford Press, 1985).
3. Peter Steinke, *How Your Church Family Works* (Herndon, VA: The Alban Institute, 1993).
4. Daniel Goleman, Richard Boyatzis, and Annie McKee, *Primal Leadership: Realizing the Power of Emotional Intelligence* (Boston: Harvard Press, 2002).
5. Conrad W. Weiser, *Healers: Harmed and Harmful* (Minneapolis: Augsburg Fortress, 1994).
6. Bowen and Kerr, *Family Evaluation* (New York: Norton Publications, 1988), 28.
7. Bowen and Kerr, *Family Evaluation*, 24-25.
8. Melody Beattie, *Talk, Trust, and Feel* (New York: Hazelden/Ballantine, 1991).
9. See Fisher's "[The Ten Commandments of Dysfunctional Families](http://ministryhealth.net)," article no. 64, online at ministryhealth.net.
10. See also Craig Nakken, *The Addictive Personality: Understanding the Addictive Process and Compulsive Behavior* (Center City, MN: Hazelden, 1996).
11. Tony Rice Drew, *Getting Them Sober*, vol. 3 (Baltimore: Recovery Publications, 1994), 73.
12. Nakken, 29.
13. Nakken, 28.
14. Cf. Speed Leas's Level IV and Level V Conflict.
15. Thomas F. Fischer, "Support Groups: Paradigm for Transformational Ministry," article no. 349, online at ministryhealth.net.
16. James C. Collins and Jerry I. Porras, *Built to Last: Successful Habits of Visionary Companies* (New York: HarperBusiness, 1994).
17. Thomas F. Fischer, "Get a BHAG," article no. 169, online at ministryhealth.net.

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Resources on Congregational Anxiety from the Congregational Resource Guide

Collins, James C., and Jerry I. Porras. [*Built to Last: Successful Habits of Visionary Companies*](#). New York: HarperCollins, 1994.

Jim Collins and Jerry Porras assert that companies "need to change in response to a changing world, while simultaneously preserving their core values and purpose." Such an assertion might apply to congregations as well. The authors compared 18 visionary companies with the same number of control companies to determine what factors create visionary companies "built to last." One key principle among visionary organizations: "clock building, not time telling." While "time-telling" organizations last as long as a great idea or charismatic leader, "clock-building" organizations last beyond the tenure of a particular project or leader. Another key principle: "Try a lot of stuff and keep what works." Many organizations stumble on major success through trial and error, experimentation, and risk taking. Similarly, congregations that are not afraid to use their gifts, and to let God reveal what works, will generate new vitality. This book provides valuable insights for congregations seeking to build an enduring purpose. The paperback version is highly recommended because the introduction explains how these principles apply to nonprofit organizations such as congregations.

Cosgrove, Charles H., and Dennis D. Hatfield. [*Church Conflict: The Hidden Systems behind the Fights*](#). Nashville: Abingdon Press, 1994.

Applying family systems theory to the local church, *Church Conflict* helps conflict-ridden congregations to heal and mature by changing the way they understand themselves as God's family. Using family systems theory, authors Charles Cosgrove and Dennis Hatfield help church leaders to discover the problems, issues, and unhealthy behaviors in the wider church family that are often behind individual problems, issues, and misbehavior. Since the way a church handles conflict can make or break its ministry, this resource is a valuable aid to church leaders for resolving conflicts in the congregation and training church members to handle conflict in a healthy way.

Farber-Robertson, Anita, with Meredith Brook Handspicker and David Whiman. [*Learning while Leading: Increasing Your Effectiveness in Ministry*](#). Herndon, VA: Alban Institute, 2000.

This book is based on the assumptions that effective leadership requires honest self-examination and that this is a difficult task because we have blind spots concerning the impact of our behavior and the thinking underlying it. As a result, our actions are often inconsistent with our most dearly held values and we are either unaware of this inconsistency or plagued with feelings of shame about it. The aim of *Learning while Leading* is to provide tools for identifying inconsistencies between our values and our actions, and for discovering and correcting the erroneous thinking that has made these inconsistencies possible. The ultimate goal of this endeavor is to enable us to become more fully aligned with our deepest values and beliefs, reclaiming the true source of religious authority. This is an important book for anyone interested in real change and growth both in themselves and in the communities or institutions they serve.

Fisher, Roger, William Ury, and Bruce Patton. [*Getting to Yes: Negotiating Agreement without Giving In*](#), 2nd ed. New York: Penguin Books, 1991.

Secular advice for negotiation, *Getting to Yes: Negotiating Agreement without Giving In* is a useful resource for those involved in congregational decision making. The book is based on answering a common question in church work: what is the best way for people to deal with their differences? The authors suggest a process of "principled negotiation," or

viewing those we are negotiating with as partners and looking for mutual gains whenever possible. The authors go on to address problems in negotiating, including what to do if those we are negotiating with are more powerful than we are or use unfair tactics, and what to do if they won't negotiate. In their last chapter, the authors list the 10 most common questions about principled negotiation and answer them in some depth.

Friedman, Edwin H. [*Generation to Generation: Family Process in Church and Synagogue*](#). New York: Guilford Publications, 1985.

Friedman—for 25 years a congregational rabbi, family therapist, and counselor to clergy of numerous faiths—describes in detail how families do and don't work. He applies the prism of family systems theory to both the congregational family and families in a congregation, focusing on the powerful position of clergy for enabling family development around life-cycle events and associated rituals. Friedman centers on behavior rather than on labeled individuals, and he demands our attention to process rather than to an "identified problem." Friedman's work is at the very core of understanding leadership work with both the static and the changing "family."

Friedman, Edwin H. [*Reinventing Leadership*](#) (video). New York: Guilford Publications, 1996.

Edwin Friedman, a rabbi in the Reformed tradition and a family systems therapist, applied the insights of family systems to understanding the dynamics of congregations in his book *Generation to Generation: Family Process in Church and Synagogue*. This video presentation builds on that work by describing how communities become dysfunctional when they are gripped by anxiety and how such communities tend to sabotage healthy leadership. The video goes on to describe the qualities required in leaders in order to overcome the sabotage. The video will prove useful to leadership groups and in classes with clergy and laity who exercise leadership roles in church and society. (Duration: 40 minutes.)

May, Gerald G. [*Addiction and Grace*](#). San Francisco: Harper & Row, 1988.

This is a powerful and highly readable text that bears reading and rereading by both pastoral caregivers and those who come to them for guidance. Author Gerald Mays explores the forces (especially addictions) that limit human freedom and the means for transcending them. Underlying the book is the premise that all of us have an innate longing or "sacred hunger" for communion with God. Unfortunately, this hunger attaches itself to any number of substances (drugs, food, money) or other phenomena (achievement, approval, intimacy), and the downward cycle of addiction begins. The author deftly describes the stages through which attachment becomes addiction, the factors that indicate addiction is present, and the psychological, neurological, and theological natures of addiction. He then discusses a way out of addiction—through grace. While we cannot summon or control grace, May suggests we can make room for grace to enter our lives—through prayer and by living faithfully as best we can, with a commitment to honesty, dignity, community, responsibility, and simplicity.

Parsons, George, and Speed B. Leas. [*Understanding Your Congregation as a System: The Manual*](#). Herndon, VA: Alban Institute, 1993.

In this application of systems theory, congregational leaders can explore the forces at work and examine their systemic implications in six key areas: strategy, process, pastoral and lay leadership, authority, relatedness, and learning. The manual provides an overview of systems theory, complete instructions for administering and scoring the Congregational Systems Inventory (available separately), and guidance for interpreting and explaining the

inventory results through the examination of sample scores. One focus of the book is to help congregations live in the tension between stability and change by encouraging adaptation to demographic and development changes without incurring too much stress and conflict.

Steinke, Peter L. [*How Your Church Family Works: Understanding Congregations as Emotional Systems*](#). Herndon, VA: Alban Institute, 1993.

As an accompaniment to Edwin Friedman's *Generation to Generation: Family Process in Church and Synagogue*, this book suggests that interrelatedness produces anxiety and other emotions, but that the anxiety inherent in interrelatedness provides opportunities for change and growth. Author Peter Steinke encourages leaders to be in relationships that neither diminish their own integrity nor intrude on the integrity of others. Healthy responses to congregational struggles, he says, include focusing on self, not others; strength, not weakness; process, not content; challenge, not comfort; integrity, not unity; system, not symptom; and direction, not condition. This book is a valuable resource for congregational leaders.

Steinke, Peter L. [*Healthy Congregations: A Systems Approach*](#). Herndon, VA: Alban Institute, 1996.

Applying the insights of systems theory to congregational life, Steinke argues that the most effective way to nurture congregational health is by shifting the focus from single individuals or issues to the way the congregation functions as a whole. The author discusses ten principles of health, how anxiety can affect a congregation, and the crucial role that leaders play in congregational functioning. In this era of emphasis on congregational growth, Steinke asserts that a declining congregation can also be healthy. Easily understandable, this book contains helpful illustrations from congregational life as well as reflection and discussion questions at the end of each chapter.

Weiser, Conrad W. [*Healers Harmed & Harmful*](#). Minneapolis: Fortress Press, 1994.

In *Healers Harmed & Harmful*, Conrad Weiser examines the roots of misconduct among clergy, counselors, and other "healers" from the perspective of contemporary clinical psychology. The premise of this publication is that the harmful or inappropriate actions of adults are manifestations of unprocessed damage from childhood. Such damage, Weiser says, can distort perceptions of reality, create an inability to accurately distinguish one's own boundaries or those of others, and interfere with the establishment of healthy relationships. This book explores a wide range of harmful behaviors that can result from unresolved psychic wounds. While not a therapeutic how-to manual for restructuring the self, this book does provide ways for clergy to discern whether they or their colleagues are significantly wounded, how these wounds might be manifesting themselves, and whether they are at risk for misconduct.